

# Editorials

## Literature and Medicine

JAMES K. GUDE, MD,<sup>1</sup>’s suggestions for a “humanistic library” elsewhere in this issue<sup>1</sup> focus on an increasingly popular relationship: the use of literature, some of it written by physicians, to open “new worlds of thought, insight, emotion, and experience,” as one author recently expressed it.<sup>2(pxi)</sup> Indeed, Peschel’s collection of critical essays, *Medicine and Literature*, closely examines medicine in literature, including the motivations of medical writers such as Rabelais, Chekhov, Williams, Schnitzler, and Selzer, who wrote eloquently about the experiences of doctoring in past and recent times. “Medicine and literature are united in an unremitting paradox: the need simultaneously to stand back from and yet to share in the struggle of human life,” wrote Edmund Pellegrino, introducing the work.<sup>2(pvii)</sup>

This is as it should be. Literature has traditionally been a part of the humanities, a field that embodies particular ways of thinking, judging, and articulating the sources and essences of our humanity. Far from being only the foundation for a number of scholarly disciplines, the humanities provide an operational approach to help all of us understand our lives. Moreover, there is a social scope to such endeavors, since through the use of language they allow us to share our emotions and reflections with others. For contemporary medical writers such as Michael Crichton, “the assimilation of important experiences almost obliges you to write about them. Writing is how you make the experience your own, how you explore what it means to you, how you come to possess it, and ultimately to release it.”<sup>3(pxi)</sup> Relationships between medical narrative and knowledge as reflected in the clinical history are among the issues currently under study.

If the writing of literature can be a liberating and even a healing experience for authors, readers will likewise benefit. The literary experience is potentially a humanizing factor in any life, but especially so for members of the health profession, who must display greater empathy and compassion toward human illness and death. Physicians with an enhanced sensitivity to language might well be better equipped to understand the values, emotions, and sensitivities of their patients. As one author postulated, “the concrete and sensuous experience of language afforded by poetry possibly contributes to a greater awareness, for both the speaker and listener—writer and reader—of what is being said and felt in many an interchange of daily ‘professional’ life.”<sup>4(p148)</sup>

In their pursuit to examine and question the presuppositions on which their professional and private lives are based, physician-authors in their works have returned to the world of human suffering, not only narrating their experiences but sharing with readers their emotions, reflections, and judgments. “We doctors are, by and large, a sentimental, humane lot. Moved by the suffering of our patients, we tend, when writing, to produce poems, essays, and stories that are sentimental and humane,” admitted Richard Selzer.<sup>5(p40)</sup> Faced with a dying patient who received therapy despite vigorous refusals, Crichton confessed that the episode troubled him for the rest of his brief medical career and prompted him to quit practicing medicine.\*

As recent publications have pointed out, the relationship between medicine and literature is often explored in medical schools today. Literature in medicine, especially in medical education, has been part of the educational reform movement of the 1970s. Some authors, like Selzer, have even questioned current medical school admission policies, stressing the importance of intuition, compassion, and ingenuity, the “trinity of doctorhood.”<sup>6</sup> The return of the humanities to the curriculum, in turn, has been the objective of prominent medical educators, notably Dr Edmund Pellegrino. As one recent report concluded, “language commands a central place in the practice and culture of physicians. Through the surrogate experiences of imaginative literature, the young physician can enlarge and supplement his or her store of experience.”<sup>7</sup> For the spring quarter, the Department of the History of Health Sciences at the University of California, San Francisco, has scheduled an elective, “Poetry in Medicine,” to be given by David H. Watts, MD. This course will examine the use of poetry to express human qualities and emotions that arise around issues of health and disease. Specific examples will be drawn from the world’s poetry; their creative and political implications will be discussed. Among the course requirements will be the writing of several new poems.

For physicians searching to “tonify their souls,” a scholarly journal, *Literature and Medicine*, offers ample nourishment. Under the editorship of Anne Hudson Jones since 1982, this yearly publication of the Johns Hopkins University Press has brought original contributions from physicians and fiction writers, arranged according to particular themes, such as the images of healers, the physician as writer, psychiatry and literature, as well as literature and bioethics. A general anthology of primary materials can be found in Ceccio’s *Medicine in Literature*.<sup>8</sup> Equally useful is the second edition of Trautmann’s (now Banks) *Literature and Medicine*, an annotated bibliography of literary works dealing with health-related subjects. This book is not only chronologically arranged and divided by topics but contains brief summaries of the cited works.<sup>9</sup> Finally, readers will enjoy two recent anthologies, one of them assembled by Cousins on physicians in literature.<sup>10,11</sup> Bon appétit!

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\*The issue of the physician as a writer was admirably discussed in the 1970s in a series of dialogues organized by the Institute on Human Values in Medicine. The five meetings took place between May 1975 and July 1976.